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APPLICANTS
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**** CONTINUING DATA ******* *none*

**** FOREIGN APPLICATIONS ******* *none*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED.. SMALL ENTITY **
**** 03/04/2002**

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY OH	SHEETS DRAWING 4	TOTAL CLAIMS 59	INDEPENDENT CLAIMS 4
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Verified and Acknowledged
 Examiner's Signature _____ Initials _____

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TITLE
 Antimicrobial polymer

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